

April 28, 2011

TO: Sean Dannen, Council Representative
Washington Federation of State Employees (WFSE)

FROM: Teresa Parsons, SPHR
Director's Review Program Supervisor

SUBJECT: Rachel Giesa v. Department of Social and Health Services (DSHS)
Allocation Review Request ALLO-10-032

On December 16, 2010, I conducted a Director's review conference regarding the allocation of the following Forms and Records Analyst 2 (F&RA 2) positions at DSHS, Western State Hospital (WSH):

Rachel Giesa	Position #RE35
Richard Parker	Position #TN31
Wilma Henderson	Position #ER64
Denise Kelley	Position #TN29
Sandra Tolman	Position #TN30

You and each of the above employees participated in the Director's review conference. Robert Swanson, Classification and Compensation Specialist, represented Department of Social and Health Services (DSHS). After the Director's review conference, the parties provided additional information and comments via email through March 15, 2011.

Director's Determination

This position review was based on the Position Description Form (PDF) submitted to WSH's Human Resources (HR) Office on June 8, 2010. As the Director's designee, I carefully considered all of the documentation in the file, the exhibits presented during the Director's review conference, and the verbal comments provided by both parties. Based on my review and analysis of Ms. Giesa's assigned duties and responsibilities, I conclude her position is properly allocated to the Forms and Records Analyst 2 classification.

Background

Prior to January 2010, Ms. Giesa's position had been part of the WSH Compliance Department and reported to the Compliance Officer, Jannah Abdul-Qadir (Exhibit B-2-a).

Around January 2010, Ms. Giesa's and the other positions included in this review became part of a new unit referred to as the Medical Billing Coordination Unit. The positions have the working title of Medical Billing Coordinator. Gaye Mercer, Financial Recovery Enforcement Officer 3, became the unit's supervisor (Exhibit B-1-b). On June 8, 2010, Ms. Mercer submitted updated PDFs to WSH's HR Office, requesting reallocation of the F&RA 2 (Medical Billing Coordinator) positions to the F&RA 3 classification. Ms. Mercer also completed an Assessment of Observed Job Performance (Exhibits B-1 and B-1-a).

On June 16, 2010, Classification & Compensation Manager, Pamela Pelton, determined the duties and responsibilities assigned to the employees' positions best fit the F&RA 2 classification. In part, Ms. Pelton concluded the duties assigned to these positions did not meet the F&RA 3 level as a specialist in two or more system areas involving multiple programs. Instead, Ms. Pelton determined the employees were performing journey level work consistent with the F&RA 2 classification.

On July 9, 2010, the Department of Personnel received a joint letter from Ms. Giesa and the other employees in the Medical Billing Coordination Unit requesting a Director's review of DSHS's allocation determination.

Summary of Employees' (Giesa, Parker, Henderson, Kelley, Tolman) Perspective

The employees assert they perform work as specialists in both health and financial records. As such, the employees indicate they review and analyze patient medical records and physician progress notes to determine the level of service to be billed. The employees assert their positions require knowledge of medical diagnostic codes and federal and state regulatory billing guidelines. The employees contend they use a patient encounter form they created to gather information from the patient medical records and assign the appropriate diagnostic code for billing purposes. The employees describe the patient encounter form as their version of a superbill, which they describe as a financial record. In addition, the employees state they audit a separate type of encounter form when completed by a physician to ensure the appropriate medical codes are applied. The employees assert they consult on the use of these forms and serve as the experts on billing requirements, including Medicare rules.

The employees indicate they enter the medical billing data from the encounter forms into the Office of Financial Recovery (OFR) Residential Program System (RPS) patient database. In the process, the employees contend they receive and review batch edit reports containing financial information from OFR. The employees assert they use these financial records containing individual patient charges to reconcile their records and perform the necessary action to ensure payment, correct a billing, or prevent a duplicate billing. The employees assert the encounter forms and supporting batch edit reports complete the financial records, which they process, maintain, file in their area, and prepare for storage and disposition. The employees assert these financial records are separate from patient health records. As a result, they believe their positions serve as specialists in two or more system areas and meet the F&RA 3 definition.

Summary of DSHS's Reasoning

DSHS asserts the duties and responsibilities assigned to the employees' positions do not meet the level of a specialist in two or more system areas. DSHS asserts the employees do not perform work with records involving multiple programs. DSHS further contends the employees have not been assigned the responsibility for serving as a consultant to management for complex forms or record problems and do not provide management consultation and determinations on responses to public records requests. DSHS recognizes the employees' knowledge regarding medical coding, rules, and billing procedures as certified health information technicians. However, DSHS contends the encounter forms used to gather information and enter the appropriate billing codes into the computer are records that are part of a larger system.

While DSHS agrees these documents have a retention period, DSHS asserts WSH's Records Coordinator retains responsibility for setting policies and procedures regarding records retention. DSHS contends the employees' positions have not been assigned records management duties at the level described by the F&RA 3 classification. DSHS indicates the employees' positions had been formerly classified as Accredited Health Record Technicians, which merged into the Forms & Records Analyst 2 classification in 2006. DSHS also notes the duties assigned to the positions include work similar to the Medical Assistance Specialist 1 class. However, DSHS asserts the duties assigned to the employees' positions are specifically encompassed in the F&RA 2 class specification. DSHS contends the majority of work assigned to the employees' positions is performed at the journey level and best fits the F&RA 2 classification.

Rationale for Director's Determination

The purpose of a position review is to determine which classification best describes the overall duties and responsibilities of a position. A position review is neither a measurement of the volume of work performed, nor an evaluation of the expertise with which that work is performed. A position review is a comparison of the duties and responsibilities of a particular position to the available classification specifications. This review results in a determination of the class that best describes the overall duties and responsibilities of the position. Little-Stamper v. Washington State University, PAB Case No. 3722-A2 (1994).

Duties and Responsibilities

The PDF summarizes the scope of work assigned to Ms. Giesa's position as follows (Exhibit B-1):

. . . this position ensures all billable services are captured from Medicaid, Medicare, and private insurance for optimal reimbursement to Western State Hospital (WSH). This position requires advanced coding experience in linking diagnoses to services and applying appropriate codes to diagnoses and procedures, works under minimal supervision and reports to a Program Specialist 4.

The majority of Ms. Giesa's duties (80%) have been described as follows:

Coding and auditing from the medical records: Apply knowledge of classification systems [International Classification of Diseases (ICD) and Current Procedural Terminology (CPT)] : ICD-9-CM, CPT-4 and HCPCS classification coding rules, guidelines and proper sequencing to analyze and audit medial record documentation:

- Abstract and assign ICD-9CM and CPT codes directly from physician notes recorded in medical chart.
- Audit and track physician charting errors; identify the need for documentation clarity to support the integrity of the record for optimal reimbursement.
- Assign ICD-9-CM and CPT codes to physician and ancillary patient encounter forms used for reimbursement purposes.
- Assign ICD-9-CM diagnoses to treatment plans for statistical purposes as well as for CMS patient benefit continuance.
- Abstract discharged medical charts for diagnosis and assign ICD-9-CM codes to each diagnosis.
- Analyze medical charts for appropriate patient identifiers and proper and complete documentation.

Data Input:

- Key ICD-9-CM and CPT codes into two computer systems.

In addition, the PDF describes 10% of Ms. Giesa's overall duties as training others regarding information related to current American Medical Association (AMA) and Center for Medicare and Medicaid (CMS) standards, regulations, and documentation/billing requirements. The PDF describes 5% of Ms. Giesa's duties as managing records retention, reviewing and processing record requests for Patient Accounting Information and developing or modifying billing or other forms.

A summary of the duties described during the desk audit includes the following (Exhibit C-18):

- Checking patient charts to determine all service levels had correctly been identified ;
- Assigning the appropriate ICD/CPT codes;
- Verifying encounter notes and forms are in agreement;
- Auditing records to ensure the appropriate billing codes had been applied, based on information in the encounter forms and patient charts and that all billable services had been billed;
- Entering all billing information into the WSH Cache system.

During Director's review conference, the employees clarified that physicians had previously completed the patient encounter forms the employees reviewed for proper billing codes. However, the employees indicated they now review patient medical records and determine

how to complete the patient encounter form based on the information included in the patient medical records. The employees described this as a higher level responsibility than previously assigned to their positions. With the exception of some specialized, contract physicians, the employees indicated they go through the patient charts and physician notes to determine the billable services, which they complete on the billing/compliance audit form (Exhibit C-9). In the employees' final rebuttal submitted after the Director's review conference, they described two types of encounter forms: "One type is completed by the physician and audited in conjunction with the health record, then billed by [the employees]." "The other type is completed, and billed, by [the employees] after reviewing the health record and analyzing physician notes for appropriateness for billing" (Exhibit D-10-a).

When completing the form, the employees assign a billing code for a particular diagnosis or procedure by referring to ICD-9 or CPT reference materials (Exhibits C-13; C-14; and C-15). They may also follow up with physicians or medical staff if the medical notes are unclear. After the billable services are coded, the employees enter the information into the Residential Program System (RPS) patient database (cache), which is automatically transmitted to OFR (Exhibit C-10). The system will send an automatic response that either accepts the information or sends it back when corrections are needed (Exhibit C-11). When the information submitted by the employees contains errors, they review and correct the data, which may involve further review of medical records, obtaining proper signatures, or correcting other errors.

The employees keep the batches of automatic transmissions from the OFR system (Exhibit C-11) and reconcile with future edit reports (Exhibit C-12). These records are filed and maintained as part of the financial records for audit purposes relating to Medicare or insurance companies. The employees maintain these records in their area for two years and then prepare the paperwork needed to send the records to the Records Retention Center. At the end of the retention period, the employees indicate whether the records can be destroyed. In addition, the employees may provide information from the medical records to OFR staff when requested to support a bill for services (Exhibit C-16). As a result, the employees may need to provide further explanation for the services billed, show a correction has been made, or ensure a duplicate billing has not occurred.

When comparing the assignment of work and level of responsibility to the available class specifications, the class series concept (if one exists) followed by definition and distinguishing characteristics are primary considerations.

The **Forms and Records Analyst 3 (F&RA 3) definition** reads as follows:

Positions at this level are specialists in two or more system areas such as financial records, student records, resident records, and/or health records, or function as a management consultant for complex manual and/or electronic forms and/or records problems, or provide management consultation and determinations on responses to public record requests. Incumbents may oversee the work of subordinate staff and coordinate the day-to-day delivery, distribution, access, maintenance and retention of manual and/or electronic forms and/or records.

The primary disagreement in this case is whether the employees serve as specialists in two or more system areas, in particular, financial records and health records. The Department of Personnel's Glossary of Classification Terms defines specialist duties as those involving "intensive application of knowledge and skills in a specific segment of an occupational area."

<http://www.dop.wa.gov/CompClass/CompAndClassServices/Pages/HRProfessionalTools.aspx>

There is no question Ms. Giesa and the other employees serve as specialists with regard to health records. They have a strong understanding of medical terminology, rules, and procedures needed to identify and properly code medical services that need to be billed. In addition, Ms. Giesa and the other employees in her work unit are certified as Registered Health Information Technicians. In the process of coding the medical procedures for billing purposes, they create and maintain forms used to document and enter the information into the computer system. The records containing automatic transmission batches and edit reports (Exhibits C-11 and C-12) are classified as financial records. However, OFR handles the financial billing piece, and the records the Medical Billing Unit employees maintain are a component of the overall financial record. The primary focus of their positions involves gathering, identifying, and verifying medical procedures to apply the proper codes so services can be billed by OFR. While these positions process financial records, they do not serve as specialists in the area of financial records. The primary focus of their positions and their area of expertise relates to health records, including the medical diagnostic codes used for billing purposes.

The **Forms and Records Analyst 2 (F&RA 2) definition** states the following:

Positions at this level provide consultation to managers and perform journey-level forms and/or records work such as analyzing manual, electronic and/or automated forms and/or records management problems, developing and implementing plans for rectifying system deficiencies, designing forms and coordinating forms production. Incumbents assist with and coordinate records retention, migration, transfer and disposition, utilize manual, electronic and/or automated systems, and provide consultation on forms and/or records management programs and system requirements. Incumbents conduct record inventories, assist with reviewing and updating record retention schedules and coordinate, retrieve information for and respond to public record requests.

The Medical Billing Unit employees perform work at the journey-level, also described as the "fully qualified level" in DOP's Glossary of Classification Terms. They analyze patient charts and physician notes to extract information needed to bill for services and apply the correct code by referencing the appropriate manual. They create and use forms needed to document this information and then enter the data into the patient database so OFR can bill the appropriate party. I recognize the employees follow up on questions relating to specific patient invoices by reviewing patient records or talking with medical staff as needed to clarify the medical services provided. The employees also resolve billing issues by clarifying or modifying their records as needed to ensure WSH receives reimbursement for services. The primary focus is on the health records to clearly identify and code the medical

procedures or services. In addition, the employees assist the WSH Records Coordinator by preparing records for retention at the state records center according to the records retention schedule. However, the WSH Records Coordinator has the decision-making authority regarding records retention (Exhibit D-8-a and b). The employees may also respond to requests for information contained in patient records to help clarify or explain issues relating to patient billing. These duties are consistent with the scope and level of responsibility identified in the F&RA 2 classification.

In addition, while examples of typical work identified in a class specification do not form the basis for an allocation, they lend support to the work envisioned within a classification. The F&RA 2 class specification includes the body of work performed by Ms. Giesa and the other employees. Specifically, one of the typical work statements includes the following:

In a healthcare facility, hospital, or institution performs records management duties such as, reviewing resident and/or patient records for completeness and accuracy, assigning diagnoses and operative procedures codes, abstracting pertinent data from treatment and/or medical records, and acting as information resource for authorized personnel requesting information from resident and/or patient records. May monitor patient's length of stay, severity of illness, and intensity of services to assure appropriate utilization of resources or explain the justification for admission, treatment, and length of stay and relay pertinent diagnostic information to authorized third party agents.

As part of my review, I also considered a number of other job classifications with similar aspects of work (Exhibit E). For example, the Fiscal Technician class series involves preparing, reviewing, verifying, and processing fiscal documents; the Fiscal Specialist class series provides administrative support in the area of fiscal management, including record keeping, auditing, and analysis of fiscal operations; and the Financial Recovery Enforcement Officer 1 and 2 classes include researching and evaluating records to assist higher level financial recovery enforcement officers or performing journey level financial recovery enforcement duties. In addition, the Medical Assistance Specialist 1 class describes work reviewing and analyzing medical claims or requests for authorization of services; and the Medical Treatment Adjudicator 1 class includes reviewing and authorizing or denying payments of bills from physicians and hospitals. While these job classes include similar aspects of work and levels of responsibility, the F&RA 2 job class specifically includes a description of work performed by the employees in the Medical Billing Unit.

The Personnel Resources Board (PRB) has held that most positions within the civil service system occasionally perform duties that appear in more than one classification. However, when determining the appropriate classification for a specific position, the duties and responsibilities of that position must be considered in their entirety and the position must be allocated to the classification that provides the best fit overall for the majority of the position's duties and responsibilities. See Dudley v. Dept. of Labor and Industries, PRB Case No. R-ALLO-07-007 (2007).

In Salsberry v. Washington State Parks and Recreation Commission, PRB Case No. R-ALLO-06-013 (2007), the PRB addressed the concept of best fit. The Board concurred with

the former Personnel Appeals Board's conclusion that while the appellant's duties and responsibilities did not encompass the full breadth of the duties and responsibilities described by the classification to which his position was allocated, on a best fit basis, the classification best described the level, scope and diversity of the overall duties and responsibilities of his position. Allegri v. Washington State University, PAB Case No. ALLO-96-0026 (1998).

Further, the PRB has concluded that while one class appeared to cover the scope of a position, there was another classification that not only encompassed the scope of the position, but specifically encompassed the unique functions performed. Alvarez v. Olympic College, PRB No. R-ALLO-08-013 (2008).

Overall, the Forms and Records Analyst 2 classification best describes the level, scope and diversity of the duties and responsibilities assigned to Ms. Giesa's position.

Appeal Rights

RCW 41.06.170 governs the right to appeal. RCW 41.06.170(4) provides, in relevant part, the following:

An employee incumbent in a position at the time of its allocation or reallocation, or the agency utilizing the position, may appeal the allocation or reallocation to . . . the Washington personnel resources board Notice of such appeal must be filed in writing within thirty days of the action from which appeal is taken.

The mailing address for the Personnel Resources Board (PRB) is P.O. Box 40911, Olympia, Washington, 98504-0911. The PRB Office is located at 600 South Franklin, Olympia, Washington. The main telephone number is (360) 664-0388, and the fax number is (360) 753-0139.

If no further action is taken, the Director's determination becomes final.

c: Rachel Giesa
Robert Swanson, DSHS
Lisa Skriletz, DOP

Enclosure: List of Exhibits

Rachel Giesa v. Department of Social and Health Services
ALLO-10-032

A. Rachel Giesa Exhibits

1. Employees' letter of request for a Director's Review, received July 9, 2010
2. Director's Review Request form

B. DSHS Exhibits with cover letter of explanation

1. Position Description Form (Position #RE35) WSH date stamp - June 8, 2010
 - a. Assessment of Observed Job Performance
 - b. Organizational Chart
 - c. Reallocation Decision Letter, dated June 16, 2010
2. Previous Updated Position Description form for Position #RE35
 - a. WSH Compliance Department 2008 Organizational Chart
3. Employees' letter of request for a Director's Review, received July 9, 2010
4. Psychiatry patient form and cover sheets to reference manuals
 - a. Psychiatry Encounter Form
 - b. ICD-9-CM manual cover
 - c. CPT Procedural Medicare Coding manual cover
5. Class Specification - Accredited Health Record Technician - Abolished
6. Class Specifications
 - a. Office Assistant 3
 - b. Fiscal Technician 3
7. Class Specification -Medical Assistance Specialist 1
8. Class Specifications
 - a. Forms and Records Analyst 2
 - b. Forms and Records Analyst 3

B-A. Bureau of Labor Statistics, Occupational Outlook Handbook 2011 Medical Records and Health Information Technicians (Informational only)

B-B. DSHS Administrative Policy No. 4.13 – Delegation of Authority, Office of Financial Recovery

C. WFSE Appeal Response Packet

9. WSH – Billing Compliance Audit Form
10. Physician Service Charge – Transmittal Control
11. Cache
12. OFR – Edit Report
13. Current Procedural Terminology (CPT)
14. CPT – 2009 Handbook
15. International Classification of Diseases (ICD-9)
16. OFR Transmittal
17. Super bills
18. Desk Audit Results email from Robert Swanson, December 6, 2010.

19. June 23, 2010 emails from Millie Brombacher, DSHS Records Officer, to Richard Parker with a copy forwarded to Rachel Giesa.

D. Follow-up email correspondence after the Director's review conference between Teresa Parsons, DOP; Robert Swanson, DSHS; and Sean Dannen, WFSE.

1. February 10, 2011 email from Sean Dannen regarding Mr. Swanson's rebuttal to employees' exhibit C-19.
2. February 11, 2011 email from Robert Swanson updating the status of his rebuttal.
3. February 18, 2011 email from Robert Swanson, stating DSHS's rebuttal to employees' exhibit C-19 (attachments to this email re-sent on March 1 – see D-8, a and b).
4. February 23, 2011 email from Robert Swanson regarding attachments to his rebuttal (Exhibit D-3 above).
5. February 25, 2011 email from Sean Dannen, requesting that Mr. Swanson's rebuttal be excluded due to the length of time it had taken to request the information necessary for his rebuttal.
6. February 25, 2011 email from Robert Swanson in response to Mr. Dannen's request to exclude his rebuttal.
7. March 1, 2011 email from Teresa Parsons to both parties, accepting Mr. Swanson's rebuttal and providing Mr. Dannen the opportunity to provide a final rebuttal on behalf of the employees.
8. March 1, 2011 from Robert Swanson, including email attachments from Mille Brombacher, DSHS Records Officer, and Jannah Abdul-Qadir, Records Coordinator for WSH (original attachments to Exhibit D-3 above):
 - a. February 14, 2011 email from Mille Brombacher, DSHS Records Officer, regarding Records Coordinators in DSHS.
 - b. February 17, 2011 email from Jannah Abdul-Qadir, Records Coordinator for WSH, regarding medical billing.
9. March 1, 2011 email from Sean Dannen with status on employees' final rebuttal.
10. March 15, 2011 email from Sean Dannen with attached rebuttal by employees:
 - a. Employees' rebuttal to Mr. Swanson's rebuttal regarding the submission of exhibit C-19 and record responsibilities at WSH.

E. Class Specifications:

1. Fiscal Technician Class Series Concept
2. Fiscal Specialist Class Series Concept
3. Financial Recovery Enforcement Officer 1 (177Q)
4. Financial Recovery Enforcement Officer 2 (177R)
5. Medical Assistant Specialist 1 (170E)
6. Medical Treatment Adjudicator 1 (171E)